HOW TO SUBMIT AN INQUIRY ABOUT YOUR PROPERTY TO AVOID DUPLICATION, PLEASE RESPOND ONLY ONCE

You may mail or fax the requested information to the address or fax number listed below. Please be sure to include all requested information. During periods of high volume, response time may be 4 to 6 weeks from date of receipt of this form.

Info	ormation about y	ou - we will search our re	cords	to de	tern	nine if you l	have propert	y
1.	Your Name	*First Name		M.I		*Last Name		
2.	Telephone #	SS#						
3.	Your Current Address	Street	City		•	State	Zip	
4.	Former Address (es)	5. E-mail address						
Information about someone else - If you would like for us to search for property in your spouse's name or a relative for whom you have a legal right to claim property for (such as an heir to the estate) or an individual for whom you have Power of Attorney, then complete the following								
6.	Search for property in the name of	*First Name		M.I		*Last Name		
7.	Social Security #		8. Da	8. Date of birth (mm/dd/yyyy)				
9.	Other "Surnames" used							
10.	addresses in <u>Va.</u>							
Sea	arch for Property li	n The Name of a Business for	r which	you h	ave	a right to cla	im	
11.	*Business/ Organization <u>Name</u>			1	12. <u>Y</u>	our Positio	n in the Busi	iness_
13	Business Tax ID							
14	*Current and/or Last Known <u>Address</u>	Street		City		State		Zip
15	*Previous Address	Street		City		State		Zip

Send the completed form to:
Department of Treasury
Division of Unclaimed Property
PO Box 2478
Richmond Virginia 23218
Fax: (804) 692 - 0576